

ECS Configuration Change Request

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CCR No.	96-0549	Logged Date	05/28/95	Rev.		Request Type	CCR
Priority	Routine <input checked="" type="checkbox"/>	Urgent <input type="checkbox"/>	Emergency <input type="checkbox"/>	Affected Release	A	Change Class	
Title (description) AMASS 4.5.1_1 Upgrade							
Documents Affected VCATS Release A Baseline				Source Nos (RID, NCR, etc.) or Tech Reference Bruce Clark, EDS Don Brown, DSS, DCB Richard Gorsky, Rel A			
RTM Change <input type="checkbox"/> Start New Baseline <input type="checkbox"/>							
Problem The current version of the AMASS FSMS software (4.5) installed in the EDF (on drpe2sgi) needs to be upgraded to version 4.5.1_1 to accommodate microcode updates required by the EMASS 8590 tape drives. The microcode updates to the 8590 tape drives are required to correct problems that IBM has identified with the 8590 drives.							
Proposed Solution Schedule the upgrade of the AMASS FSMS software to version 4.5.1_1 in the EDF for the week of June 3, 1996. Concurrently schedule the upgrade of the EMASS 8590 tape drive microcode. Both upgrades are expected to require a total downtime of two days.							
Impact Analysis: Organizations Affected: BOO <input type="checkbox"/> Contracts <input type="checkbox"/> ESO <input type="checkbox"/> FOS <input type="checkbox"/> M&O <input checked="" type="checkbox"/> QA <input type="checkbox"/> Rel. A <input checked="" type="checkbox"/> Rel. B <input type="checkbox"/> Rel. IR1 <input type="checkbox"/> MRS <input type="checkbox"/> SMO <input type="checkbox"/> Subconts <input type="checkbox"/> Other _____ Cost: None <input checked="" type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> (Not exceeding \$100,000) (\$100,000 to \$500,000) (Over \$500,000) Schedule: None <input checked="" type="checkbox"/> Other _____ Additional LOC _____ Man-Months _____ Materials _____							
Originator Richard Gorsky _____ Signature _____ Date _____							
Office Release A Office Manager _____ Signature _____ Date _____							
Disposition Approved <input type="checkbox"/> Approved w/Comment <input type="checkbox"/> Forward <input type="checkbox"/> Disapproved <input type="checkbox"/> Comments:							
CCB Chairperson _____ Signature _____ Date _____							